24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)		PAGE 1 OF 3 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼		
Women Vote! C C00473918		
		000473310
Check if 24-hour report X 48-hour report New report Amends report filed on		
Full Name of Payee	Date of P	Public Distribution/Dissemination
Catalist, LLC		09 / 2016
Mailing Address 1090 Vermont Ave NW		
Ste 300		
City State Zip Coo Washington DC 20005-		500.00 ion ID : VN7A7A25MR2
		Disbursement or Obligation
Purpose of Expenditure Mailhouse Categ	ory/ ype 004	M / D = D / Y = Y = Y
Name of Federal Candidate	Support Office Sought:	X House District: 10
Val Demings	Oppose President	Senate State: FL
Calendar Year-To-Date Per Election for Office Sought	Disbursement For 2016 Other	or:
Full Name of Payee SKDKnickerbocker LLC	M = 1	
Mailing Address 1818 N St NW	08	09 2016
Ste 450	Amount	
City State Zip Co	de	22190.81
Washington DC 20036	= 0	on ID: VN7A7A25MV6 Disbursement or Obligation
Purpose of Expenditure Media Production Categ	ory/ ype 004	M / D D / Y T Y T Y
Name of Federal Candidate	Support Office Sought:	House District: 00
Kelly Ayotte	X Oppose President	Senate State: NH
Calendar Year-To-Date Per Election for Office Sought 224785		
Other (specify)		
(a) SUBTOTAL of Itemized Independent Expenditures		
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Caroline Fines [Electronically Filed] Date 08 09 2016		
Signature		